

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number 10501684		Filing Date		
							Applicant(s) Edward Marshall				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	1		1				51				
2		1		1			52				
3		1		1			53				
4		1		1			54				
5		1		1			55				
6		1		1			56				
7		1		1			57				
8		1		1			58				
9		3		1			59				
10		3		1			60				
11		(1)		1			61				
12		(1)		1			62				
13		(1)		1			63				
14		1		1			64				
15		(1)		1			65				
16		(1)		1			66				
17		(1)		1			67				
18		(1)		1			68				
19		(1)		1			69				
20		(1)		1			70				
21		(1)		1			71				
22		1		1			72				
23	1		1				73				
24		1		1			74				
25		2		1			75				
26		1		1			76				
27		1		1			77				
28		2	---	---			78				
29		1		1			79				
30		1		1			80				
31		1		1			81				
32		1		1			82				
33		(1)		1			83				
34		1		1			84				
35		1		1			85				
36							86				
37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	2		2		0						
Total Depend	39	↙	32	↙	0	↙					
Total Claims	41		34		0						